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NORWAI						(Signature)	
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	1	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/538,250	10/538,250 08/23/2005		Per Herbert Kristensen		P17993USPC	1874	
TITLE OF INVENTION: S							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	``	DATE DUE	
nonprovisional	NO	\$1510	\$300	<b>\$</b> 0	\$1810	02/08/2011	
EXAMINER		ART UNIT	CLASS-SUBCLASS	J	_		
PRICE, CRAIG JAMES		3753	137-615000			-/- \ At	
1. Change of correspondenc CFR 1.363).  Change of correspon- Address form PTO/SB/1  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	dence address (or Char 22) attached.	nge of Correspondence	(1) the names of up to or agents OR, alternati (2) the name of a single registered attorney or 2 registered patent attorney.	For printing on the patent front page, list the names of up to 3 registered patent attorneys agents OR, alternatively, the name of a single firm (having as a member a gistered attorney or agent) and the names of up to egistered patent attorneys or agents. If no name is ted, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Lysaker, Worway							
Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government							
4a. The following fee(s) are Issue Fee Publication Fee (No s Advance Order - # o	ermitted)	A check is enclosed.  Payment by credit car	Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed. Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number				
5. Change in Entity Status  a. Applicant claims S		above)	$\mathcal{A}$		L ENTITY status. See 37 CI		
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PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.